State of Idaho

DEPARTMENT OF INSURANCE

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Director

INSTRUCTIONS FOR COMPLETING AND FILING QUARTERLY PREPAYMENT OF ANNUAL PREMIUM TAXES

Idaho Code, § 41-402 (3)(a) requires prepayment of premium tax if the sum of the tax for the prior calendar year's business was **\$400** or **more**. Prepayments shall be based on the *preceding calendar year's business* at the *current year's premium tax rate*.

NOTE: Any insurer failing to postmark <u>on or before</u> the due date, the <u>signed</u> Premium Tax Quarterly Prepayment Installment form and the appropriate tax remittance, shall be liable for a penalty of \$25 for each day of delinquency.

LINE A. Enter prior year's net taxable premiums (do not include fees) from your 2005 Statement of Premium Taxes and Fees:

Life & Health Insurers use Page 5, Schedule E, Column A, total of Line 1 **plus** Line 2 Property & Casualty Insurers use Page 5, Schedule E, Column A, total of Line 1 **plus** Line 2 Insurer's Using Health Blank use Page 6, Schedule E, Column A, Line 1 **plus** Lines 2 and 3 Risk Retention Groups use Page 3, Schedule B, Column A, Line 1 Title Companies use Page 3, Schedule C, Column A, Line 1

LINE B. To calculate Estimated Tax, multiply the total shown on Line A by applicable tax rate:

Calendar Year 2006 premium tax rate is: 2.30% or 1.42%.

(If qualified for the reduced rate, attach certification statement for *each* quarter) Title Companies 1.5%

LINE C. Multiply the Estimated Tax shown on Line B by the appropriate percentage rate:

60% - due June 15, 2006

20% - due September 15, 2006

15% - due December 15, 2006

Insurers with a prior year's tax liability of \$400 or more MUST make prepayments.

If Line B is **less** than \$400, prepayments and prepayment forms are not required.

Make check payable to: IDAHO DEPARTMENT OF INSURANCE (Your canceled check is your receipt).

There will be a \$20.00 charge on all returned checks - Idaho Code § 28-22-105.

Prior tax overpayments cannot be deducted as refunds checks are issued.

Remittances postmarked after the above due dates should include the penalty due; otherwise, you will be billed.

Changes in company status such as mergers, name or addresses must be reported.

Companies in receivership must provide legal documentation that precludes prepayment of premium taxes.

REQUIRED

Original SIGNED prepayment form

Signature and title of officer

Separate payments for each company

Payments of \$100,000 or more MUST be paid by Electronic Funds Transfer-Automated Clearing House Method. Refer to Idaho State Treasurer's EFT Payment Guide for bank account information located on our website at www.doi.idaho.gov, Company Services, Filing Requirements, EFT Payment Guide.

Indicate if payment is sent by Electronic Fund Transfer (EFT) under LINE C.